Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u>

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notifi	cations.					s; and/or (b) indicating a sep		
CURRENT CORRESPON	RRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
22850	22850 7590 01/16/2004							
CUSTOMER NUMBER					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. (Depositor's name)			
[*] 22850			/ Par 3		<i>!</i>			
			C				(Signature)	
			STENT & TR				(Date)	
APPLICATION NO	PLICATION NO. FILING DATE		FIRST NAMED		ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/019,313	10/019,313 01/09/2002		Randolf I		go	217475US0PCT	7463	
TITLE OF INVENTIO	N: METHOD	FOR REMOVING	MERCAPTANS FROM FLUID FLUXE		UXES	•		
•								
APPLN. TYPE	N. TYPE SMALL ENTITY		ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional			\$1330		\$0	\$1330	04/16/2004	
			ART UNIT		CLASS-SUBCLASS	٦		
L	EXAMINER			<u>'</u>		J		
	GEL, WAYNE			1754 208-237000				
1. Change of correspo CFR 1.363).	ndence address	or indication of "Fe	ee Address" (37		on the patent front page to 3 registered patent	e, list (1) the OBLON,	SPIVAK,	
Change of corres	nondence addr	ess (or Change of C	Correspondence	agents OR, all	ernatively, (2) the name	of a single McCLEL	LAND, MAIER	
Address form PTO	/SB/122) attach	ed.	correspondence		s a member a registered names of up to 2 regis	attorney or 2	TADT, P.C.	
□ "Fee Address" ir PTO/SB/47; Rev 0 Number is require	3-02 or more r	ee Address" Indicat ecent) attached. Use	tion form e of a Customer		gents. If no name is list		TAD1, P.O.	
3. ASSIGNEE NAME	AND RESIDE	ENCE DATA TO B	E PRINTED ON TI	HE PATENT (pr	nt or type)			
PLEASE NOTE: U been previously su (A) NAME OF AS		nee is identified be JSPTO or is being	low, no assignee da submitted under seps (B)	ta will appear on arate cover. Com RESIDENCE: (the patent. Inclusion of pletion of this form is NO CITY and STATE OR CO	assignee data is only appropr OT a substitute for filing an as: OUNTRY)	iate when an assignment has signment.	
BASF Akt	iengese	llschaft	L	udwigsha	en, GERMANY			
Please check the appro	opriate assignee	category or catego	ories (will not be prin	nted on the paten); 🗅 individual 🛭	corporation or other private g	group entity 🖸 government	
4a. The following feet	(s) are enclosed	:		Payment of Feet	•			
					amount of the fee(s) is e			
□ Publication Fee □ Advance Order - # of Copies								
☐ Advance Order	- # of Copies _	-0-	'	Deposit Account	Number 15-003	(enclose an extra	copy of this form).	
Director for Patents is	requested to a	oply the Issue Fee a	nd Publication Fee ((if any) or to re-a	pply any previously paid	issue fee to the application id	entified above.	
(Authorized Signature	detta	Reg 16.26,	803 (Date)	L12, 2004				
other than the appl interest as shown by	icant; a registe the records of	ered attorney or ag the United States P	atent and Trademark	e or other party k Office.	in 04/13	/2004 HVUDNG2 0000018	18 10019313	
This collection of it obtain or retain a b application. Confide estimated to take 12 completed applicaticase. Any commer suggestions for redipatent and Trader 22313-1450. DO The SEND TO: Commission of the commi	on form to the are ucing this burd mark Office, NOT SEND F	Higher, including a second of time would of time you en, should be sent U.S. Department FES OR COMPLI	ill vary depending trequire to complet to the Chief Inform of Commerce, A	upon the individue this form and	ual /or	:1501	1330.00 OP	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.